

# FEC FORM 9

## 24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

### 1. Individual, Organization or Qualified Nonprofit Corporation Making the Disbursement/Obligations

(a) Name

UN ITED FOOD &amp; COMMERCIAL WORKER INTL UNION

(b) Address (number and street) ☐ check if different than previously reported

1775 K Street N.W.

(c) City, State and ZIP Code

Washington

DC

20006

### 2. FEC Identification Number

C C00000000

(d) Name of Employer or Principal Place of Business

(e) Occupation

### 3. Is This Statement

☒

New

or

☐

Amended

### 4. Covering Period

M M / D D / Y Y Y Y  
09 / 15 / 2008

through

M M / D D / Y Y Y Y  
09 / 19 / 2008

5. (a) Date of Public Distribution(s) M M / D D / Y Y Y Y (b) Communication Title WUWM408  
09 / 18 / 2008

6. The filer is a(n): (a) ☐ Individual (b) ☐ Unincorporated Organization (c) ☐ Qualified Nonprofit Corporation (11 CFR 114.10)

(d) ☒ Corporation, Labor Organization or Qualified Nonprofit Corporation making communications under 11 CFR 114.15

(e) ☐ Other, specify: \_\_\_\_\_

7. Were the disbursements for the electioneering communication made exclusively from donations to a segregated bank account? Yes ☐ No ☐

### 8. Custodian of Records

(a) Name

Mr Anthony M Perrone

(b) Address (number and street)

1775 K Street, NW

(c) City, State and ZIP Code

Washington

DC

20006

(d) Name of Employer or Principal Place of Business

United Food &amp; Commercial Workers Intl

(e) Occupation

Secretary-Treasurer

### 9. Total Donations This Statement

.00

### 10. Total Disbursements/Obligations This Statement

150000.00

Under penalty of perjury, I certify that this statement is true, correct and complete.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

Mr Anthony M Perrone

SIGNATURE Electronically Filed by Mr Anthony M Perrone

DATE 09/24/2008

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this statement to the penalties of 2 U.S.C. 437g.